Name in Full Sasha Bannen

Certificate of Death

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month Dec Day 19 | Age Y. 26 M. 11 D. | Native of Md | Occupation house work

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife —

Father's Name Leon Bannen

Mother's Name Rhoda Atkinson

Cause of Death: Primary Consumption 22a | How long sick about 1 year

Immediate Exhaustion | ~~Accident, Suicide, Homicide~~

Reported by John Moore Md.

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name In Full

Certificate of Death

Mollie, Chamberlain

Died at Town E. N. Market County Dorchester MARYLAND

Date 1899 Month Dec Day 26th Age Y. 17 M. " D. . Native of Maryland Occupation Domestic

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Thos. B. Chamberlain Mother's Name Mary F. Chamberlain

Cause of Death Primary Consumption How long sick 4 months

Immediate 22a ~~Accident, Suicide, Homicide~~

Reported by Rev. S. E. Maloney M.D.

Address E. N. Market. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79828

Attended by Dr. George A Jones

of _____

Seen by Coroner _____

of _____

Name in Full

Certificate of Death

Adeline Matilda Hicks

Died at Town: East New Market County: Dor. Co. MARYLAND

Date 1899 Month: 12 Day: 14 Age Y. 77 M. 7 D. Native of Dorchester Co. Occupation Lady

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 4

~~Husband~~ of Wife Thos J. Hicks

Father's Name Samuel Sweell Mother's Name —

Cause of Death: Primary Apoplexy 42 How long sick 3 hours

Immediate Paralysis Accident, Suicide, Homicide

Reported by Geo L. Jones

Address East New Market

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65965

Name in Full

John H. Howard

Certificate of Death

Died at Town: Cambridge County: Dorchester MARYLAND

Date 189 9 Month: Dec Day: 15 | Age Y. 45 M. D. | Native of: Dorchester Co | Occupation: Carter

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living: 1

Husband / Wife of: Eliza Jane Howard

Father's Name: ——— | Mother's Name: ———

Cause of Death — Primary: Typhoid Fever 1 | How long sick: 5 Weeks

Immediate: Congestion of Lungs | Accident, Suicide, Homicide

Reported by: P. W. Goldsborough

Address: Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70708

Name in Full Maggie Hughes

Certificate of Death

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month Dec. Day 23 | Age Y. 45 M. D. | Native of Md | Occupation Housework

~~Male~~ ~~White~~ Married ~~Widow~~ Divorced

Female Colored ~~Single~~ ~~Widower~~ Number of children living 3

Husband of Wife Posterfield Hughes

Father's Name Isaac Neal Mother's Name Rebecca Standley

Cause of Death Primary Gall stone & Bright Ds'ne How long sick

Immediate Exhaustion 91 ~~Accident, Suicide, Homicide~~

Reported by John Moore MD

Address Cambridge Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name in Full

Certificate of Death

Benj. J. Lecompte

Died at Town Woolford County Dorchester Co MARYLAND

Date 189 9 Month Dec Day 16 Age Y. 25 M. D. Native of Md Occupation Laborer

Male ~~White~~ Married ~~Widow~~ Divorced

~~Female~~ Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband / Wife of Annie Lecompte

Father's Name — Mother's Name — 22 f

Cause of Death: Primary Galloping Consumption How long sick 3 weeks

Immediate — Accident, Suicide, Homicide

Reported by John Moore MD

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Name in Full: Gladdys M. Littell

Certificate of Death

Died at: near Town Cambridge County Dorchester MARYLAND

Date 1899 Month Dec. Day 15 | Age Y. — M. D. 30 | Native of Dor. Co | Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name: John Littell

Mother's Name: Emma M. Mitchell

Cause of Death: Primary not known 161 | How long sick 2 days

Immediate —

~~Accident, Suicide, Homicide~~

Reported by: John Littell Father

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name in Full Robert Meekins

Certificate of Death

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month Dec. Day 12 | Age Y. 22 M. about D. | Native of Dor Co | Occupation Broker

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Geo. W. Meekins

Mother's Name —

Cause of Death: Primary Typhoid Fever 1 | How long sick 6 weeks

Immediate Congestion of brain | Accident, Suicide, Homicide

Reported by Guy Steele M. D.

Address Cambridge Md.

Must be signed by physicien, if any in ettendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name In Full

Certificate of Death

Lizzie Stewart

Died at Town East New Market County Dorchester MARYLAND

Date 1899 Month Dec Day 7 Age Y. 79. M. 6. D. Native of Maryland Occupation Domestic

~~Male~~ ~~White~~ Married Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 3

Husband of Wife [illegible]

Father's Name Moses Pinder Mother's Name Margret Pinder

Cause of Death Primary From old Age 141 How long sick 5 months

Immediate Accident, Suicide, Homicide

Reported by Rev. S. E. Maloney, M.D.,

Address East New Market Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79[illegible]

Attended by Dr. Heffernon

of Hyrlock

Seen by Coroner

of